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FY 20 FY 20 (Fees pursuant to the Consolidated Ap	05		61658(50530)
Application Number 10	/613,206-Conf. #4593	Filed	July 3, 2003
For AZA-PEPTIDE MACROCYCL	IC HEPATITIS C SERINE PRO	DTEASE INHIBITOR	RS
Art Unit 1654		Examiner	T. S. Heard
This is a request under the provisions dentified application. The requested extension and fee are	as follows (check time period o	desired and enter the	e appropriate fee below);
X One month (37 CFR 1.17	<u>Fee</u> 7(a)(1)) \$120	Small Entity \$60	<u>Fee</u> \$ 60.00
Two months (37 CFR 1.1		\$225	\$
Three months (37 CFR 1		\$510	\$
Four months (37 CFR 1.1	17(a)(4)) \$1590	\$795	\$
Five months (37 CFR 1.1	7(a)(5)) \$2160	\$1080	\$
X Applicant claims small entity si	latus. See 37 CFR 1,27.		
A check in the amount of the fe			
Payment by credit card. Form			
X The Director has already been	•	ie application to a D	Ionarit Aanaunt
X The Director is hereby authoriz	ed to charge any fees which m	ay be required, or c	redit any overpayment, to
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